

Contents

1 Follow-up Straw Poll Results	2
2 Respondent Breakdown	2
3 Overview of Results for CBR Follow-up Straw Poll	2
Section I Results: 835 Code Combinations for Inclusion in March 2025 CBR Follow-up Straw Poll	3
Section II: 277CA Error Code Combinations Industry Feedback.....	4
4 Next Steps	4
5 Appendix	5

1 Follow-up Straw Poll Results

This document provides the results of the *CORE Code Combinations Task Group Follow-up Straw Poll (FSP) on Potential Compliance-based Adjustments to the CORE Code Combinations v3.0.0 February 2025*. More information about the potential Compliance-based Adjustments considered by the Task Group can be found [here](#).

2 Respondent Breakdown

16 organizations responded to the CCTG FSP, representing 53% of the Task Group's active membership. The breakdown of respondents by stakeholder type is shown in Table 1.

Table 1: Responses from Task Group Participating Entities by Number and Entity Type

Number of Active* Task Group Participating Entities	30
Total Number of Individual Organizational Responses	16 (53%)
Health Plan/Health Plan Association Responses	4 (25%)
Provider/Provider Association Responses	3 (19%)
Vendor/Clearinghouse Responses	4 (25%)
Government Responses (State Medicaid Agencies, etc.)	2 (12%)
Other Stakeholder Type Responses (SDO/Regional Entities, etc.)	3 (19%)

*NOTE: Active participants attend most Task Group calls and responded to most Task Group Straw Polls for the last 5 Compliance-based Reviews or are new to the task group in 2025.

3 Overview of Results for CBR Follow-up Straw Poll

The CBR FSP included five code combinations requested by the CORE Code Combinations Task Group (CCTG) for inclusion on the *Follow-up Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations v3.9.0 February 2025*.

The March 2025 Compliance-based Review (CBR) Follow-up Straw Poll included:

- **2 code** combinations that were written in on the March 2025 CBR Initial Straw Poll (ISP) by a CCTG Participant.
- **3 code** combinations that received high support for addition (>65%) but were recommended for follow-up polling by the CCTG during the April 1 call.

CCTG Participants had the opportunity to submit additional comments for or against the addition of each proposed code combination. These comments are included alongside support levels outlined in **Table 3** and **Table 4** of this document.

CORE also received a general comment with the polled code combinations, outlined below in **Table 2**.

CAQH Committee on Operating Rules for Information Exchange (CORE) Code Combinations Task Group
Results: Task Group Initial Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations for
CORE-defined Business Scenarios v3.9.0 February 2025

Table 2: General Comments Received with CORE Responses to CBR FSP Code Combinations

Line	Point of Clarification	Co-chair and CORE Response
1	One organization commented that the responsibility for code combination maintenance lies with the X12 RSC, not CORE.	Maintenance of the HIPAA mandated CAQH CORE Payment & Remittance (835) Uniform Use of CARCs and RARCs Rule for the electronic reporting of claims adjustment and denials by CORE Participating Organizations helps to mitigate industry confusion regarding the use of the claim denial/adjustment codes. CORE Participating Organizations are required to maintain the CORE Code Combinations and work within the published X12 CARC and RARC lists to achieve a consistent and uniform approach to code combination usage by industry. This maintenance process is required to be conducted by CAQH CORE under HIPAA.

Section I Results: 835 Code Combinations for Inclusion in March 2025 CBR Follow-up Straw Poll

Table 3 shows support and anonymized comments received for the written-in code combination in the March 2025 CBR FSP. The written-in code combinations received >65% support from the Task Group and are **RECOMMENDED for addition** by CORE staff and CCTG Co-chairs to the *CORE Code Combinations*. Support broken out by stakeholder type is shown in the Appendix.

Table 3: Code Combinations Written-in included on the March 2025 Follow-up Straw Poll Receiving >65% Support for ADDITION to the CORE Code Combinations

Proposal: **ADD** to the CORE Code Combinations. Breakdowns of responses by stakeholder types are in the APPENDIX.

Line	Support %	Business Scenario	CARC	RARC	CAGC	Comments For	Comments Against
1	79% Recommendation: ADD to CORE Code Combinations	3 <i>Billed Service Not Covered by Health Plan</i>	95 <i>Plan procedures not followed.</i>	N906 <i>Service is not covered when a patient is under age 45.</i>	CO, PI or PR	<ul style="list-style-type: none"> Two organizations commented that they support this combination with the suggested CAGC codes. 	
2	93% Recommendation: ADD to CORE Code Combinations	3 <i>Billed Service Not Covered by Health Plan</i>	272 <i>Coverage/program guidelines were not met.</i>	N906 <i>Service is not covered when a patient is under age 45.</i>	CO, PI, or PR	<ul style="list-style-type: none"> Two organizations commented that they support this combination with the suggested CAGC codes. 	

Table 4 shows support and anonymized comments received for the code combinations recommended for re-polling in the March 2025 CBR FSP. The re-poll code combinations received >65% support from the Task Group and are recommended for **ADDITION** by CORE staff and CCTG Co-chairs for addition to the *CORE Code Combinations*. Support broken out by stakeholder type is shown in the Appendix.

CAQH Committee on Operating Rules for Information Exchange (CORE) Code Combinations Task Group
Results: Task Group Initial Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations for
CORE-defined Business Scenarios v3.9.0 February 2025

Table 4: Code Combination recommended for re-polling included on the March 2025 Follow-up Straw Poll Receiving >65% Support for ADDITION to the CORE Code Combinations

Proposal: **ADD** to the CORE Code Combinations. Breakdowns of responses by stakeholder types are in the APPENDIX.

Line	Support %	Business Scenario	CARC	RARC	CAGC	Comments For	Comments Against
1	85% Recommendation: ADD to CORE Code Combinations	3 <i>Billed Service Not Covered by Health Plan</i>	269 <i>Anesthesia not covered for this service/procedure. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.</i>	N906 <i>Service is not covered when a patient is under age 45.</i>	CO, PI or PR	<ul style="list-style-type: none"> Two organizations commented that they support this combination with the suggested CAGC codes. 	<ul style="list-style-type: none"> One organization commented that it is more likely the associated procedure would have an age limit.
2	85% Recommendation: ADD to CORE Code Combinations	3 <i>Billed Service Not Covered by Health Plan</i>	299 <i>The billing provider is not eligible to receive payment for the service billed.</i>	N905 <i>Our records show you have opted out of Medicare, agreeing with the patient not to bill Medicare for services/tests/supplies furnished. As a result, we cannot pay this claim. The patient is not responsible for payment.</i>	CO or PI	<ul style="list-style-type: none"> Two organizations commented that they support this combination with the suggested CAGC codes. 	<ul style="list-style-type: none"> One organization commented that N905 seems to be a duplicate of MA47.
3	92% Recommendation: ADD to CORE Code Combinations	3 <i>Billed Service Not Covered by Health Plan</i>	B7 <i>This provider was not certified/eligible to be paid for this procedure/service on this date of service. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.</i>	N905 <i>Our records show you have opted out of Medicare, agreeing with the patient not to bill Medicare for services/tests/supplies furnished. As a result, we cannot pay this claim. The patient is not responsible for payment.</i>	CO or PI	<ul style="list-style-type: none"> Two organizations commented that they support this combination with the suggested CAGC codes. 	

Section II: 277CA Error Code Combinations Industry Feedback

In Section II of the *CORE Code Combinations Task Group March 2025 CBR Follow-up Straw Poll*, CORE collected industry feedback from Task Group Participants on their organizational workflows related to the rejecting, denying, or pending of claims submitted that are missing necessary attachments.

Responses and comments received from the Task Group will be used to help guide future CORE research, rule development opportunities, and future *CORE Code Combinations* and *CORE Error Code Combination* considerations by this task group.

4 Next Steps

- Results were shared with CCTG Participants via email on Friday, May 9, 2025, for review.
- Approved adjustments to the *CORE Code Combinations* will be included in *CORE Code Combinations v3.9.1 June 2025*, which will be published by June 1, 2025.
- Approved adjustments to the CORE Error Code Combinations will be included in the *CORE Error Code Combinations v1.0.1 June 2025*, which will be published by June 1, 2025.
- Approved draft Error Code Combination Criteria will be published by June 1, 2025.

5 Appendix

Table 5: Support for Code Combination Write-in Included on the March 2025 Follow-up Straw Poll by Stakeholder Type

Proposed Code Combination	% Support	% Health Plans	% Providers	% Vendors or Clearinghouses	% Government	% Other (Includes Standards Orgs)
CARC 95 / RARC N906	79%	75%	100%	75%	50%	100%
CARC 272 / RARC N906	93%	100%	100%	75%	100%	100%
CARC 269 / RARC N906	85%	100%	67%	67%	100%	100%
CARC 299 / RARC N905	85%	100%	100%	67%	50%	100%
CARC B7 / RARC N905	92%	100%	100%	67%	100%	100%